EXHIBIT F

COMMONWEALTH OF VIRGINIA AFFIRMATION OF CITIZENSHIP

§ 24.2-410.1 of the Code of Virginia

SUBJECT TO PENALTY OF LAW, I DO HEREBY AFFIRM THAT I AM A CITIZEN OF THE UNITED STATES OF AMERICA

SIGNATURE OF VOTER	ER
PRINTED NAME	
OF VOTER:	
date of birth:	
urent address:	Street P.O. Box/Apt.# City/Town State/Zip
dailing address [if ifferent]	Street P.O. Box/Apt.# City/Town State/Zip
Jaytime telephone tumber;	
email address:	

FORM IS A FELONY. THE PUNISHMENT IS UP TO TEN YEARS IN PRISON AND A FINE UP TO \$2,500. YOU ALSO LOSE YOUR RIGHT TO VOTE. NITENTIONALLY MAKING A MATERIALLY FALSE STATEMENT ON THIS

IF YOU ARE A CITIZEN. PLEASE RETURN COMPLETED FORM TO:

Arlington County Elections

Office of Voter Registration 1100 Chrendon Bixd Sec 320 Arington, VA 22201-5445